POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Mr*	*6781*	*9/22/0*
O.I.P.E. CLASSIFIER		8	*9-28-00*
FORMALITY REVIEW	*Jk*	*B35*	*10/26/00*
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date									Claim		Date									Claim		Date								
Final	Original										Final	Original										Final	Original										
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50												100												150										

If more than 150 claims or 10 actions
staple additional sheet here

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